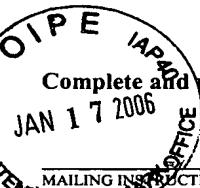


PART B - ISSUE FEE (S) TRANSMITTAL



Complete and mail this form, together with applicable fees, to:

Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence concerning patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate FEE ADDRESS for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

REED SMITH LLP
 SUITE 1400
 3110 FAIRVIEW PARK DRIVE
 FALLS CHURCH, VA 22042
 01/18/2006 MBEYENE2 00000224 10821888

01 FC:1501 1400.00 OP
 02 FC:1504 300.00 OP
 03 FC:8001 9.00 OP

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Certificate of Mailing

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(Depositor's name)

(Signature)

(Date)

| APPLICATION NO | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO | CONFIRMATION NO. |
|----------------|-------------|----------------------|--------------------|------------------|
| 10/821,888 | 04/12/2004 | Akira Murotani | ASAM.0119 | 2499 |

TITLE OF INVENTION: DISK ARRAY APPARATUS AND DISK ARRAY APPARATUS CONTROL METHOD

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 02/08/2006 |

| EXAMINER | ART UNIT | CLASS - SUBCLASS |
|-------------|----------|------------------|
| GU. SHAWN X | 2189 | 711-114000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR §1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (have as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed

1. Reed Smith LLP

2. Stanley P. Fisher, Esq.

3. Juan Carlos A. Marquez, Esq.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

HITACHI, LTD.

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual

Corporation or private group entity

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Advance Order- # of Copies: 3

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) to the application identified above.

(Authorized Signature)

(Date) **January 17, 2006**

Stanley P. Fisher Reg. No. 24,344 Juan C. A. Marquez Reg. No. 34,072

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